

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)USE FEC MAILING LABEL
OR TYPE OR PRINT ▼Example: If typing, type
over the lines

Graves for Congress

ADDRESS (number and street)

2345 Grand, Suite 2400

☐Check if different
than previously
reported. (ACC)

Kansas City

MO

64108

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00359034

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

MO

6

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

01

2005

through

12

31

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jean Paul Bradshaw

Signature of Treasurer

Electronically Filed by Jean Paul Bradshaw

Date

09

22

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Graves for Congress

Report Covering the Period:

From:

M M
1 0D D
0 1Y Y Y Y
2 0 0 5

To:

M M
1 2D D
3 1Y Y Y Y
2 0 0 5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	128353.00	591970.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	128353.00	591970.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	80293.18	383657.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	5872.54	133070.43
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	74420.64	250587.08
8. Cash on Hand at Close of Reporting Period (from Line 27).....	405192.63	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2644.65	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
Graves for Congress

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

40180.00

255255.00

(ii) Unitemized.....

8585.00

25377.00

(iii) TOTAL of contributions

48765.00

280632.00

from individuals..... ▶

588.00

963.00

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACS).....

79000.00

310375.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)

128353.00

591970.00

(add Lines 11(a)(iii), (b), (c), and (d))

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....**

0.00

0.00

13. LOANS(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

**14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....**

5872.54

133070.43

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

19.35

115.96

**16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶**

134244.89

725156.39

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	80293.18	383657.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	59315.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	80293.18	442972.51

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	351240.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	134244.89
25. SUBTOTAL (add Line 23 and Line 24).....	485485.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	80293.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	405192.63

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate Sam Graves		Candidate ID Number <div style="border: 1px solid black; padding: 2px;">H0MO06073</div>
Name of Principal Campaign Committee Graves for Congress		Committee ID Number <div style="border: 1px solid black; padding: 2px;">C C00359034</div>
Committee Address 2345 Grand, Suite 2400		
City Kansas City	State MO	ZIP 64108-
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	<div style="border: 1px solid black; padding: 2px;">0.00</div>	<div style="border: 1px solid black; padding: 2px;">0.00</div>
2. Aggregate amount of contributions from personal funds of the candidate	<div style="border: 1px solid black; padding: 2px;">0.00</div>	<div style="border: 1px solid black; padding: 2px;">0.00</div>
3. Gross receipts minus the candidate's personal contributions	<div style="border: 1px solid black; padding: 2px;">0.00</div>	<div style="border: 1px solid black; padding: 2px;">0.00</div>

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Bayer Corporation PAC

Mailing Address 1275 Pennsylvania Ave., NW
Suite 801

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6841

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Print PAC

Mailing Address 100 Daingerfield Rd.

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6809

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

National Cattlemens Beef Assn. PAC

Mailing Address 1301 Pennsylvania Ave., NW suite 30

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: 60802.C6575

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
Union Pacific Fund for Effective Govern

Mailing Address 600 Thirteenth Street, NW
Suite 340

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6594

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Beef-PAC

Mailing Address 5501 I-40 West

City State Zip Code
Amarillo TX 79106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: 60802.C6565

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Council of Farmer Co-Op PAC

Mailing Address 50 F Street NW
Suite 900

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6806

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. American Crystal Sugar Company PAC

Mailing Address 101 North Third Street

City State Zip Code
 Moorhead MN 56560

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6820

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Boeing PAC

Mailing Address 1200 Wilson Blvd.

City State Zip Code
 Arlington VA 22209

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 1 / 2 0 0 5

Transaction ID: 60802.C6595

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. American Council of Engineers Co.s PAC

Mailing Address 1015 15th Street NW
Suite 802

City State Zip Code
 Washington DC 20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6819

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

National Beer Wholesalers Assoc.

Mailing Address 1100 S. Washington Street

City State Zip Code
 Alexandria VA 22314-4494

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6805

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Ave, NW
(CULAC)

City State Zip Code
 Washington DC 20005-2601

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6870

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Ave, NW
(CULAC)

City State Zip Code
 Washington DC 20005-2601

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6869

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. American Health Care Assoc. PAC

Mailing Address 1201 L Street, N.W.

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6781

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Deloitte & Touche Federal PAC

Mailing Address P. O. Box 365

City State Zip Code
 Washington DC 20044-0365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6599

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. ACRE Action Committee For Rural Electri

Mailing Address 4301 Wilson Boulevard

City State Zip Code
 Arlington VA 22203-1860

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 0 5

Transaction ID: 60802.C6572

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Ameren Fed PAC

Mailing Address 101 Constitution Ave., NW
Suite 800

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6844

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Ameren Fed PAC

Mailing Address 101 Constitution Ave., NW
Suite 800

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6843

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. BNSF Rail PAC

Mailing Address 700 13th St., NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6578

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Federal Express PAC

Mailing Address 942 S. Shady Grove Road

City State Zip Code
 Memphis TN 38120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6848

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Aircraft Owners & Pilots Assn. PAC

Mailing Address 421 Aviation Way

City State Zip Code
 Frederick MD 21701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6577

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Aircraft Owners & Pilots Assn. PAC

Mailing Address 421 Aviation Way

City State Zip Code
 Frederick MD 21701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6821

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. RJR Political Action Committee

Mailing Address 1201 F St. NW
Suite 1000

City State Zip Code
Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6593

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Pfizer PAC

Mailing Address 235 East 42nd Street

City State Zip Code
New York NY 10017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6854

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Electrical Construction PAC

Mailing Address 3 Bethesda, Suite 1100

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6583

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. American Bankers Association PAC

Mailing Address 1120 Connecticut Ave. N.W.

City State Zip Code
 Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6596

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. American Bankers Association PAC

Mailing Address 1120 Connecticut Ave. N.W.

City State Zip Code
 Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6597

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. General Electric Company PAC

Mailing Address 1299 Pennsylvania Ave. NW

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6830

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial) Power PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address 701 Pennsylvania Ave. N.w.		Transaction ID: 60802.C6780
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Anheuser-Busch Political Action Committee		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 5
Mailing Address 1401 Street NW, Suite 200		Transaction ID: 60802.C6845
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Anheuser-Busch Political Action Committee		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 5
Mailing Address 1401 Street NW, Suite 200		Transaction ID: 60802.C6846
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 7000.00	

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Indoor Tanning Association, Inc. PAC

Mailing Address PO Box 4001

City State Zip Code
Jackson MI 49204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6833

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Lumber Dealers Political Action Committee

Mailing Address 40 Ivy St SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6801

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

John Deere Political Action Committee

Mailing Address One John Deere Place

City State Zip Code
Moline IL 61265

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6590

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
Land OLakes PAC
Mailing Address P. O. Box 64101

City State Zip Code
Saint Paul MN 55164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6799

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mike R Fund
Mailing Address P. O. Box 65796

City State Zip Code
Washington DC 20035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6837

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
DTAG PAC

Mailing Address 5330 E 31st St

City State Zip Code
Tulsa OK 74135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6826

Amount of Each Receipt this Period

3500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
Democracy Believers Political Action Com

Mailing Address 1155 21st Street, N. W.

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6600

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Blue Cross Blue Shield of K.C. Fed PAC

Mailing Address P.O. Box 419169

City State Zip Code
Kansas City MO 64141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6728

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Hardwood Federation PAC

Mailing Address P.O. Box 34518

City State Zip Code
Memphis TN 38184

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6603

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Air Pac

Mailing Address 1301 Pennsylvania Ave., Suite 1100

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6779

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. National Air Transportation PAC

Mailing Address 4226 King St.

City State Zip Code
 Alexandria VA 22302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6607

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Biotechnology Industry Organization

Mailing Address 1625 K St. NW, Suite 1100

City State Zip Code
 Washington DC 20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6598

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Growth and Prosperity PAC

Mailing Address 1155 21st St, NW, Suite 300

City State Zip Code
 Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6831

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

General Motors Corporation PAC

Mailing Address 1660 L Street, NW Suite 400

City State Zip Code
 Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6585

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Rice Federation PAC

Mailing Address 4301 North Fairfax Dr., Ste 305

City State Zip Code
 Arlington VA 22203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 1 3 / 2 0 0 5

Transaction ID: 60802.C6568

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Bryan Cave LLP Political Fund

Mailing Address 700 13th St, NW, Ste 700

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 0 5

Transaction ID: 60802.C6573

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Bryan Cave LLP Political Fund

Mailing Address 700 13th St, NW, Ste 700

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6579

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Daimler Chrysler Corporation PAC

Mailing Address 1000 Chrysler Drive

City State Zip Code
 Auburn Hills MI 48326

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6580

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
 Internation Asson. of Fire Fighiters PAC
 Mailing Address 1750 New York Ave, NW

City State Zip Code
 Washington DC 20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6588

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
 Internation Asson. of Fire Fighiters PAC
 Mailing Address 1750 New York Ave, NW

City State Zip Code
 Washington DC 20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6851

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
 Match Pac
 Mailing Address 7300 Beaufont Springs Dr

City State Zip Code
 Richmond VA 23225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6591

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 105

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. JM Family PAC

Mailing Address 111 Jim Moran Boulevard

City State Zip Code
 Deerfield Beach FL 33442

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6604

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Clear Channel Communications PAC

Mailing Address 1401 I Street NW Suite 401

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6789

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Acpa Pac

Mailing Address 5420 Old Orchard Rd
Suite A100

City State Zip Code
 Skokie IL 60077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6818

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

79000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial) Stanley K. Griffin		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Mailing Address No. 1 Whispering Woods Lane P. O. Box 232		Transaction ID: 60802.C6617	
City Rock Port	State MO	Zip Code 64482	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Griffin Farms	Occupation Farm Manager		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 575.00		
B. Full Name (Last, First, Middle Initial) Karl E. Sigler		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 5	
Mailing Address 32813 E. Oak Hill School Road		Transaction ID: 60802.C6862	
City Oak Grove	State MO	Zip Code 64075	Amount of Each Receipt this Period 1100.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Enterprise Interiors Inc.	Occupation Corp. President		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		
C. Full Name (Last, First, Middle Initial) Robert G. Bolin, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5	
Mailing Address 3955 Riverside Terrace		Transaction ID: 60802.C6759	
City Saint Joseph	State MO	Zip Code 64507	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Bolin Auto & Truck Parts	Occupation Sales		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Marilyn, A. Shaum

Mailing Address 1100 Elm Street

City State Zip Code
Tarkio MO 64491

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6610

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Woodrow Kline

Mailing Address 1910 Lakeview Dr.

City State Zip Code
Chillicothe MO 64601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Woodys Dodge Jeep Eagle

Occupation
Salesman

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6688

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Jimmie D. Carter

Mailing Address 3301 N. Belt Hwy.
3302 E. Devonshire

City State Zip Code
Saint Joseph MO 64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Camolaur, Inc.

Occupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6788

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Gregory L. Henson

Mailing Address 2513 SW Still Meadows Lane

City State Zip Code
 Blue Springs MO 64015-5261

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heartland Tanning Supply

Occupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6832

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Joseph A. Kneib

Mailing Address 26665 W. 103rd Street

City State Zip Code
 Olathe KS 66061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Herzog Contracting Corpor-
ation

Occupation
Vice-President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 3 / 2 0 0 5

Transaction ID: 60802.C6567

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Michael W. Wilson

Mailing Address 1018 NW Clinton County Line Road

City State Zip Code
 Smithville MO 64089-8215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Secure Pharmacy Plus

Occupation
Pharmacist

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6723

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Joseph A. Lovenduski

Mailing Address 23747 Hwy P.

City State Zip Code
 Brookfield MO 64628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Self Employed

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6692

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Harvey Tettlebaum

Mailing Address 56295 Little Moniteau Rd.

City State Zip Code
 California MO 65018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Husch Eppenberger

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6864

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Sandra Karns Roberts

Mailing Address 3119 La Ronda Place, NE

City State Zip Code
 Albuquerque NM 87110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Farmer

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6811

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial) Hal R. Sinclair Mailing Address 8609 N. Shannon Ave. City State Zip Code Kansas City MO 64153-1777 FEC ID number of contributing federal political committee. C Name of Employer Phoenix Scientific, Inc. Occupation Veterinary Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5 Transaction ID: 60802.C6632 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Tom Broderick Mailing Address 6841 N. Highway 33 City State Zip Code Plattsburg MO 64477 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Farmer Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 292.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5 Transaction ID: 60802.C6651 Amount of Each Receipt this Period 42.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Norman J. , Jr. Jester Mailing Address 5820 NW 96th Dr City State Zip Code Pompano Beach FL 33076 FEC ID number of contributing federal political committee. C Name of Employer Hercog Transit Service Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 5 Transaction ID: 60802.C6608 Amount of Each Receipt this Period 2100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2192.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial) D. P. Coleman Mailing Address 7902 NW Scenic Dr. City State Zip Code Kansas City MO 64152-1645 FEC ID number of contributing federal political committee. C Name of Employer Coleman Industrial Constn Occupation Railroad Contractor Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 1 / 2 0 0 5 Transaction ID: 60802.C6824 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Harry Broermann Mailing Address 13833 M Ave. City State Zip Code Tarkio MO 64491 FEC ID number of contributing federal political committee. C Name of Employer Self Employed Occupation Farmer & Historian Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 242.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5 Transaction ID: 60802.C6730 Amount of Each Receipt this Period 42.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Carole C. Coots Mailing Address 2104 Fourth St City State Zip Code Platte City MO 64079 FEC ID number of contributing federal political committee. C Name of Employer Wells Bank of Platte City Occupation Banker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5 Transaction ID: 60802.C6652 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

642.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial) Edith Lee Mailing Address 1300 NW 43rd Ter. City State Zip Code Kansas City MO 64116-1689 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1100.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 2 / 2 0 0 5 Transaction ID: 60802.C6743 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) R. Philip Acuff Mailing Address 3015 Miller Rd City State Zip Code Saint Joseph MO 64506 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5 Transaction ID: 60802.C6570 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Tom B. Kretsinger, Sr. Mailing Address P. O. Box 516 City State Zip Code Liberty MO 64069 FEC ID number of contributing federal political committee. C Name of Employer Occupation American Central Transport, Inc. President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1100.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 5 Transaction ID: 60802.C6858 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
Gerald Gorman
Mailing Address 917 E. Vivion Road

City State Zip Code
Kansas City MO 64118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Slagel, Bernard

Occupation
Lawyer

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6850

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Larry Hamann
Mailing Address 512 Macon

City State Zip Code
Brookfield MO 64628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6672

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
David Ericks
Mailing Address 5005 Glenrose

City State Zip Code
Miccosukee Cpo FL 32309

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Governmental Constultant

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6601

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
Robert Gunderson
Mailing Address 20789 County Rd. 306

City State Zip Code
Saint Joseph MO 64505-9367

FEC ID number of contributing federal political committee.

C

Name of Employer
Phoenix Scientific, Inc.Occupation
Vice President, Regulatory Af

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6670

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Victor Hurlbert
Mailing Address 9701 N. Kenwood Ct.

City State Zip Code
Kansas City MO 64155

FEC ID number of contributing federal political committee.

C

Name of Employer
Clay County, MissouriOccupation
Auditor

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6684

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John Holton
Mailing Address 13900 NW 72nd Street

City State Zip Code
Kansas City MO 64152

FEC ID number of contributing federal political committee.

C

Name of Employer
Mail SolutionsOccupation
CEO

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6680

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Jane Copsey

Mailing Address P.O. Box 112

City State Zip Code
Maitland MO 64466

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hallway Telephone Co.

Occupation
owner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

367.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6654

Amount of Each Receipt this Period

42.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Linda Cozad

Mailing Address 21550 92 Hwy

City State Zip Code
Platte City MO 64079

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6790

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Nikki Parshall

Mailing Address 811 Elm Street

City State Zip Code
Tarkio MO 64491

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6807

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

492.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Wesley Norton

Mailing Address 1368 NW 296th

City State Zip Code
 Plattsburg MO 64477

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Farmer

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 267.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6764

Amount of Each Receipt this Period

42.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Clark, W. Hampton

Mailing Address 6 Antilles Dr.

City State Zip Code
 Saint Joseph MO 64506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6738

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Peggy Swearingin

Mailing Address 29654 CR 191

City State Zip Code
 Carrollton MO 64633

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 217.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6769

Amount of Each Receipt this Period

42.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

334.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Doug Summa

Mailing Address 509 Main St.

City State Zip Code
Tarkio MO 64491

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Pharmacist

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6713

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Ed Wolfe

Mailing Address PO Box 613

City State Zip Code
Richmond MO 64085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6720

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Ben Wierzbicki

Mailing Address 113 Delores St

City State Zip Code
Excelsior Springs MO 64024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Insurance Executive

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6722

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
Matt Jessee
Mailing Address 700 13th Street, NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bryan Cave

Occupation
Director Federal Affairs

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6589

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Daivd Fransiak
Mailing Address 873 Coachway

City State Zip Code
Annapolis MD 21401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Williams and Jensen

Occupation
Vice President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6584

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Susan Hirschmann
Mailing Address 4052 Seminary Rd

City State Zip Code
Alexandria VA 22304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Williams and Jensen

Occupation
Partner

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6587

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

John Oliver, III

Mailing Address PO Box 559

City State Zip Code
 Cape Girardeau MO 63702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6592

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Marilyn Lawrence

Mailing Address 28589 Lake Ave Way

City State Zip Code
 Frontenac MN 55026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawrence Property Mgt.,
Inc.

Occupation
Property Manager

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6605

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

John P. McAllister

Mailing Address 326 South Carolina Ave, SE

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
McAllister and Walsh

Occupation
Governmental Relations

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6606

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
Donna M. Jester
Mailing Address 5820 NW 96th Dr

City State Zip Code
Pompano Beach FL 33076

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6609

Amount of Each Receipt this Period

400.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
James Shaum
Mailing Address 1100 Elm St

City State Zip Code
Tarkio MO 64491

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 5

Transaction ID: 60802.C6611

Amount of Each Receipt this Period

400.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Steve Irvine
Mailing Address 21290 US HWY 59

City State Zip Code
Tarkio MO 64491

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Farmer

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6621

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Karen Lovenduski

Mailing Address 23747 HWY P

City State Zip Code
 Brookfield MO 64628

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6691

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Neal Patterson

Mailing Address 20 E Dundee Cir

City State Zip Code
 Belton MO 64012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cerner Corporation

Occupation
CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6766

Amount of Each Receipt this Period

420.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Bonnie Goins

Mailing Address PO Box 8007

City State Zip Code
 Saint Joseph MO 64508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6792

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

920.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Robert K. Arensberg

Mailing Address 1401 I Street NW Suite 1100

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gage Business Consulting

Occupation
Government Affairs

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6822

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Julie Chlopecki

Mailing Address 1547 Evers Drive

City State Zip Code
 Mc Lean VA 22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Governmental Consultant

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6823

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Jim Frank

Mailing Address 1200 Hamptondale

City State Zip Code
 Winnetka IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wheels, Inc.

Occupation
President/CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6827

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

Jim Frank

Mailing Address 1200 Hamptondale

City State Zip Code
 Winnetka IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wheels, Inc.

Occupation
President/CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6828

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Karen Frank

Mailing Address 1200 Hamptondale

City State Zip Code
 Winnetka IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Simply Splendid

Occupation
owner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6829

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

George Kilroy

Mailing Address 7110 Charles Spring Way

City State Zip Code
 Towson MD 21204

FEC ID number of contributing
federal political committee.

C

Name of Employer
PHH Arval

Occupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6834

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Jane Garvey Mattoon

Mailing Address 6344 Cavalier Corridor

City State Zip Code
 Falls Church VA 22044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6835

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. William McKee

Mailing Address 303 Willowmere Ln

City State Zip Code
 Ambler PA 19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Automotive Resources

Occupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6836

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Gary Rappeport

Mailing Address 2315 Sanders Rd

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Donlen Corporation

Occupation
President/CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6839

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 105

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
Gary L. Tepas
Mailing Address 805 W. Thorndale

City State Zip Code
Itasca IL 60143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Emkay, Inc.

Occupation
Chairman & CEO

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 1 / 2 0 0 5

Transaction ID: 60802.C6840

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Leigh Lamora
Mailing Address 501 Slaters Lane No. 110

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Governmental Relations

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6852

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Leigh Lamora
Mailing Address 501 Slaters Lane No. 110

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Governmental Relations

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6853

Amount of Each Receipt this Period

400.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A.

Full Name (Last, First, Middle Initial)

David Reid

Mailing Address 3709 NE 95th ST

City

Kansas City

State

MO

Zip Code

64156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bryan Cave

Occupation

Partner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: 60802.C6860

Amount of Each Receipt this Period

400.00

Receipt

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

40180.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 105

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

98.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 0 5

Transaction ID: 60802.C6569

Amount of Each Receipt this Period

98.00

In-Kind

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Fax sent on behalf of can-
didat

B. Full Name (Last, First, Middle Initial)
National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

196.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60802.C6576

Amount of Each Receipt this Period

98.00

In-Kind

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Fax sent on behalf of can-
didat

C. Full Name (Last, First, Middle Initial)
National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6774

Amount of Each Receipt this Period

98.00

In-Kind

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

fax sent on behalf of can-
didat

SUBTOTAL of Receipts This Page (optional)

294.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 105

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)
National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City State Zip Code
 Washington DC 20003

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

392.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6776

Amount of Each Receipt this Period

98.00

In-Kind

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

fax send on behalf of can-
didat

B. Full Name (Last, First, Middle Initial)
National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City State Zip Code
 Washington DC 20003

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6777

Amount of Each Receipt this Period

98.00

In-Kind

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

fax sent on behalf of can-
diadt

C. Full Name (Last, First, Middle Initial)
National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City State Zip Code
 Washington DC 20003

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

588.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60802.C6775

Amount of Each Receipt this Period

98.00

In-Kind

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

fax sent on behalf of can-
didat

SUBTOTAL of Receipts This Page (optional)

294.00

TOTAL This Period (last page this line number only)

588.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Graves for Congress

A. Full Name (Last, First, Middle Initial)

AT&T Telephone Company

Mailing Address P.O. Box 940012

City State Zip Code
 Dallas TX 75394-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5920.33

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 7 / 2 0 0 5

Transaction ID: 60802.C6866

Amount of Each Receipt this Period

5872.54

Offsets to Operating Expe-
nditu

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5872.54

TOTAL This Period (last page this line number only)

5872.54

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Nova Information Systems

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2177

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

46.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD PROCESSING FEE

Full Name (Last, First, Middle Initial)

B. UMB Visa

Mailing Address 1010 Grand Blvd.

City Kansas City State MO Zip Code 64106-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2049

Date of Disbursement

12 / 02 / 2005

Amount of Each Disbursement this Period

5591.61

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Ace Blue Waters Charters

Mailing Address 401 Biscayne Blvd

City Miami State FL Zip Code 33132-

Purpose of Disbursement
FUNDRAISER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2062

Date of Disbursement

10 / 20 / 2005

Amount of Each Disbursement this Period

882.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FUNDRAISER

SUBTOTAL of Disbursements This Page (optional)

5637.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Ace Blue Waters Charters

Mailing Address 401 Biscayne Blvd

City Miami State FL Zip Code 33132-

Purpose of Disbursement
FUNDRAISER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2086

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

231.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FUNDRAISER

Full Name (Last, First, Middle Initial)

B. Barry Point 66

Mailing Address 9795 NE Barry Road

City Kansas City State MO Zip Code 64154-

Purpose of Disbursement
GAS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2082

Date of Disbursement

11 / 03 / 2005

Amount of Each Disbursement this Period

19.67

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GAS

Full Name (Last, First, Middle Initial)

C. Federal Express Shipping

Mailing Address PO Box 94515

City Palatine State IL Zip Code 60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2084

Date of Disbursement

11 / 04 / 2005

Amount of Each Disbursement this Period

15.42

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Federal Express Shipping

Mailing Address PO Box 94515

City Palatine State IL Zip Code 60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2085

Date of Disbursement

11 / 06 / 2005

Amount of Each Disbursement this Period

19.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

Full Name (Last, First, Middle Initial)

B. Federal Express Shipping

Mailing Address PO Box 94515

City Palatine State IL Zip Code 60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2064

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

20.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 8501 North Evanston Avenue

City Kansas City State MO Zip Code 64157-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2060

Date of Disbursement

10 / 19 / 2005

Amount of Each Disbursement this Period

16.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 8501 North Evanston Avenue

City Kansas City State MO Zip Code 64157-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2056

Date of Disbursement

10 / 16 / 2005

Amount of Each Disbursement this Period

34.11

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 8501 North Evanston Avenue

City Kansas City State MO Zip Code 64157-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2052

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

151.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 8501 North Evanston Avenue

City Kansas City State MO Zip Code 64157-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2066

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

3.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Signature Wine Cellars

Mailing Address 2536 Barrington Ct

City Hayward State CA Zip Code 94545-

Purpose of Disbursement
FUNDRAISING GIFTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2071

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

292.97

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FUNDRAISING GIFTS

Full Name (Last, First, Middle Initial)

B. The UPS Store

Mailing Address 844 S M-291 Hwy

City Liberty State MO Zip Code 64068-

Purpose of Disbursement
COPIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2055

Date of Disbursement

10 / 15 / 2005

Amount of Each Disbursement this Period

5.60

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: COPIES

Full Name (Last, First, Middle Initial)

C. Travel Tyne

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
CREDIT FOR AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2051

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

-20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CREDIT FOR AGENT FEE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2070

Date of Disbursement

10 / 28 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2072

Date of Disbursement

11 / 02 / 2005

Amount of Each Disbursement this Period

385.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2069

Date of Disbursement

10 / 28 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2073

Date of Disbursement

/ /

Amount of Each Disbursement this Period

385.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2068

Date of Disbursement

/ /

Amount of Each Disbursement this Period

770.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2074

Date of Disbursement

/ /

Amount of Each Disbursement this Period

770.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2080

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2079

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2075

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2076

Date of Disbursement

/ /

Amount of Each Disbursement this Period

159.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2077

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2067

Date of Disbursement

/ /

Amount of Each Disbursement this Period

507.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2058

Date of Disbursement

/ /

Amount of Each Disbursement this Period

159.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2078

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
CREDIT FOR AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2061

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-159.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CREDIT FOR AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2059

Date of Disbursement

10 / 18 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

B. USPS-Liberty

Mailing Address 1000 Progress Dr

City Liberty State MO Zip Code 64068-

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2065

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

185.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

C. Shawn Graybill

Mailing Address 4443 NE 83rd Terr

City Kansas City State MO Zip Code 64119-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2200

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement
FAX SEND ON BEHALF OF CANDIDAT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.C67761K

Date of Disbursement

/ /

Amount of Each Disbursement this Period

98.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

IN KIND: FAX SEND ON BEHA-
LF OF CANDIDAT

Full Name (Last, First, Middle Initial)

B. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City
San Dimas

State
CA

Zip Code
91773-

Purpose of Disbursement
PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2181

Date of Disbursement

/ /

Amount of Each Disbursement this Period

31.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PROCESSING FEE

Full Name (Last, First, Middle Initial)

C. Tom Brand

Mailing Address 3204 Dale Avenue

City
Saint Joseph

State
MO

Zip Code
64506-

Purpose of Disbursement
EVENTS - SPEAKING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2167

Date of Disbursement

/ /

Amount of Each Disbursement this Period

240.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EVENTS - SPEAKING FEE

SUBTOTAL of Disbursements This Page (optional)

369.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 / 105

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
FAX SENT ON BEHALF OF CANDIDAT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.C6569IK

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

98.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

IN KIND: FAX SENT ON BEHA-
LF OF CANDIDAT

Full Name (Last, First, Middle Initial)

B. David P. Williams

Mailing Address 1554 Canterbury Lane

City Liberty State MO Zip Code 64068-

Purpose of Disbursement
CAMPAIGN OFFICE RENT/UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2159

Date of Disbursement

12 / 19 / 2005

Amount of Each Disbursement this Period

1291.89

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN OFFICE RENT/UTIL-
ITIES

Full Name (Last, First, Middle Initial)

C. The Lukens Company

Mailing Address 2800 Shirlington Road

City Arlington State VA Zip Code 22202-

Purpose of Disbursement
MAILING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2173

Date of Disbursement

12 / 19 / 2005

Amount of Each Disbursement this Period

6676.63

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MAILING

SUBTOTAL of Disbursements This Page (optional)

8066.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Sarah N. Bowles

Mailing Address 10231 N. Cherry Dr.

City Kansas City State MO Zip Code 64155-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2190

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. Nova Information Systems

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2202

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD PROCESSING FEE

Full Name (Last, First, Middle Initial)

C. Shawn Graybill

Mailing Address 4443 NE 83rd Terr

City Kansas City State MO Zip Code 64119-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2195

Date of Disbursement

12 / 29 / 2005

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional)

5030.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City
San Dimas

State
CA

Zip Code
91773-

Purpose of Disbursement
PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2182

Date of Disbursement

/ /

Amount of Each Disbursement this Period

72.46

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PROCESSING FEE

Full Name (Last, First, Middle Initial)

B. Scott E. Thomas Photography

Mailing Address 6133 Blue Ridge Blvd.

City
Kansas City

State
MO

Zip Code
64113-

Purpose of Disbursement
CAMPAIGN PHOTOS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2172

Date of Disbursement

/ /

Amount of Each Disbursement this Period

38.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN PHOTOS

Full Name (Last, First, Middle Initial)

C. Friendly Phones, Inc.

Mailing Address P.O. Box 147

City
Bethany

State
MO

Zip Code
64424-

Purpose of Disbursement
COMPUTER SYSTEM LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2170

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1530.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

COMPUTER SYSTEM LEASE

SUBTOTAL of Disbursements This Page (optional)

1640.51

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Lathrop & Gage, LLC.

Mailing Address 2345 Grand Blvd

City Kansas City State MO Zip Code 64108-2684

Purpose of Disbursement
POSTAGE LONG-DISTANCE COPIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2161

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

57.98

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POSTAGE LONG-DISTANCE COP-
IES

Full Name (Last, First, Middle Initial)

B. Sarah N. Bowles

Mailing Address 10231 N. Cherry Dr.

City Kansas City State MO Zip Code 64155-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2199

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

C. David P. Williams

Mailing Address 1554 Canterbury Lane

City Liberty State MO Zip Code 64068-

Purpose of Disbursement
CAMPAIGN OFFICE RENT/UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2158

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

2979.29

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CAMPAIGN OFFICE RENT/UTIL-
ITIES

SUBTOTAL of Disbursements This Page (optional)

5537.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Shawna M. Pauley

Mailing Address 1126 Elm Street

City
Chillicothe

State
MO

Zip Code
64601-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2189

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement
FAX SENT ON BEHALF OF CANDIDAT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.C6775IK

Date of Disbursement

/ /

Amount of Each Disbursement this Period

98.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

IN KIND: FAX SENT ON BEHA-
LF OF CANDIDAT

Full Name (Last, First, Middle Initial)

C. UMB Visa

Mailing Address 1010 Grand Blvd.

City
Kansas City

State
MO

Zip Code
64106-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2038

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1299.46

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

3397.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 1st Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
FUNDRAISER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2039

Date of Disbursement

/ /

Amount of Each Disbursement this Period

485.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FUNDRAISER

Full Name (Last, First, Middle Initial)

B. DC Crandon Golf Course

Mailing Address 6700 Crandon Blvd

City Key Biscayne State FL Zip Code 33149-

Purpose of Disbursement
GOLF FUNDRAISER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2041

Date of Disbursement

/ /

Amount of Each Disbursement this Period

466.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GOLF FUNDRAISER

Full Name (Last, First, Middle Initial)

C. Stefanos Wine & Spirits

Mailing Address 24 Crandon Blvd

City Key Biscayne State FL Zip Code 33149-

Purpose of Disbursement
DRINKS FOR FUNDRAISER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2040

Date of Disbursement

/ /

Amount of Each Disbursement this Period

296.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: DRINKS FOR FUNDRAISER

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. UMB Visa

Mailing Address 1010 Grand Blvd.

City Kansas City State MO Zip Code 64106-

Purpose of Disbursement
FINANCE CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2043

Date of Disbursement

/ /

Amount of Each Disbursement this Period

12.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FINANCE CHARGE

Full Name (Last, First, Middle Initial)

B. UMB Visa

Mailing Address 1010 Grand Blvd.

City Kansas City State MO Zip Code 64106-

Purpose of Disbursement
LATE CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2042

Date of Disbursement

/ /

Amount of Each Disbursement this Period

39.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: LATE CHARGE

Full Name (Last, First, Middle Initial)

C. UMB Visa

Mailing Address 1010 Grand Blvd.

City Kansas City State MO Zip Code 64106-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2032

Date of Disbursement

/ /

Amount of Each Disbursement this Period

274.51

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

274.51

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Oceanaire Seafood Room

Mailing Address 1201 F Street, NW

City Washington State DC Zip Code 20004-

Purpose of Disbursement
DONOR MEETING

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2034

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	0	5

Amount of Each Disbursement this Period

245.81

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: DONOR MEETING

Full Name (Last, First, Middle Initial)

B. National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
FAX SENT ON BEHALF OF CANDIDAT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.C65761K

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	0	5

Amount of Each Disbursement this Period

98.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53IN KIND: FAX SENT ON BEHA-
LF OF CANDIDAT

Full Name (Last, First, Middle Initial)

C. The Salvation Army

Mailing Address 4300 N.E. Parvin Road

City Kansas City State MO Zip Code 64117-

Purpose of Disbursement
CHARITABLE DONATION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2164

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CHARITABLE DONATION

SUBTOTAL of Disbursements This Page (optional)

1098.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Mail Solutions, Inc.

Mailing Address 1441 Atlantic Ave

City Kansas City State MO Zip Code 64116-

Purpose of Disbursement
MAILING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2174

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

725.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MAILING

Full Name (Last, First, Middle Initial)

B. CM Events

Mailing Address 1077 Fairfax Circle West

City Boynton Beach State FL Zip Code 33436-

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2168

Date of Disbursement

12 / 19 / 2005

Amount of Each Disbursement this Period

286.87

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING EXPENSE

Full Name (Last, First, Middle Initial)

C. Kurtz Rural Aviation

Mailing Address 130 Airport Lane

City Mound City State MO Zip Code 64470-

Purpose of Disbursement
TRAVEL - AVIATION FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2160

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

518.96

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TRAVEL - AVIATION FUEL

SUBTOTAL of Disbursements This Page (optional)

1530.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. UMB Visa

Mailing Address 1010 Grand Blvd.

City State Zip Code
Kansas City MO 64106-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2094

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3495.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

B. DAgge Florist

Mailing Address 18 East Franklin

City State Zip Code
Liberty MO 64068-

Purpose of Disbursement
GIFS FOR CAMPAIGN EVENT HOST

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2140

Date of Disbursement

/ /

Amount of Each Disbursement this Period

53.68

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GIFS FOR CAMPAIGN
EVENT HOST

Full Name (Last, First, Middle Initial)

C. Federal Express Shipping

Mailing Address PO Box 94515

City State Zip Code
Palatine IL 60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2097

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.42

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

SUBTOTAL of Disbursements This Page (optional)

3495.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Federal Express Shipping

Mailing Address PO Box 94515

City
Palatine

State
IL

Zip Code
60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2110

Date of Disbursement

/ /

Amount of Each Disbursement this Period

23.06

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

Full Name (Last, First, Middle Initial)

B. Federal Express Shipping

Mailing Address PO Box 94515

City
Palatine

State
IL

Zip Code
60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2144

Date of Disbursement

/ /

Amount of Each Disbursement this Period

16.02

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

Full Name (Last, First, Middle Initial)

C. Hy-Vee Foods

Mailing Address 1332 H 152 Highway

City
Liberty

State
MO

Zip Code
64068-

Purpose of Disbursement
CLEANING SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2124

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.98

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CLEANING SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 8501 North Evanston Avenue

City Kansas City State MO Zip Code 64157-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2107

Date of Disbursement

11 / 15 / 2005

Amount of Each Disbursement this Period

54.65

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 8501 North Evanston Avenue

City Kansas City State MO Zip Code 64157-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2111

Date of Disbursement

11 / 18 / 2005

Amount of Each Disbursement this Period

5.37

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

C. Office Depot

Mailing Address 8501 North Evanston Avenue

City Kansas City State MO Zip Code 64157-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2127

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

264.94

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Super 8 Motel

Mailing Address I-29 & 136 HWY

City State Zip Code
Rock Port MO 64482-

Purpose of Disbursement

MOTEL ROOM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2149

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MOTEL ROOM

Full Name (Last, First, Middle Initial)

B. Super 8 Motel

Mailing Address I-29 & 136 HWY

City State Zip Code
Rock Port MO 64482-

Purpose of Disbursement

MOTEL ROOM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2151

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MOTEL ROOM

Full Name (Last, First, Middle Initial)

C. Super 8 Motel

Mailing Address I-29 & 136 HWY

City State Zip Code
Rock Port MO 64482-

Purpose of Disbursement

MOTEL ROOM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2154

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MOTEL ROOM

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Super 8 Motel

Mailing Address I-29 & 136 HWY

City State Zip Code
Rock Port MO 64482-

Purpose of Disbursement

MOTEL ROOM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2150

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MOTEL ROOM

Full Name (Last, First, Middle Initial)

B. Super 8 Motel

Mailing Address I-29 & 136 HWY

City State Zip Code
Rock Port MO 64482-

Purpose of Disbursement

MOTEL ROOM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2148

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MOTEL ROOM

Full Name (Last, First, Middle Initial)

C. Super 8 Motel

Mailing Address I-29 & 136 HWY

City State Zip Code
Rock Port MO 64482-

Purpose of Disbursement

MOTEL ROOM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2153

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MOTEL ROOM

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Super 8 Motel

Mailing Address I-29 & 136 HWY

City
Rock Port

State
MO

Zip Code
64482-

Purpose of Disbursement
MOTEL ROOM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2152

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: MOTEL ROOM

Full Name (Last, First, Middle Initial)

B. The UPS Store

Mailing Address 844 S M-291 Hwy

City
Liberty

State
MO

Zip Code
64068-

Purpose of Disbursement
FAX SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2126

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FAX SERVICES

Full Name (Last, First, Middle Initial)

C. Travel Tyne

Mailing Address 1904 Clay Street

City
Chillicothe

State
MO

Zip Code
64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2131

Date of Disbursement

/ /

Amount of Each Disbursement this Period

155.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2129

Date of Disbursement

/ /

Amount of Each Disbursement this Period

155.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2130

Date of Disbursement

/ /

Amount of Each Disbursement this Period

155.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2128

Date of Disbursement

/ /

Amount of Each Disbursement this Period

155.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2102

Date of Disbursement

11 / 10 / 2005

Amount of Each Disbursement this Period

92.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2136

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

115.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2103

Date of Disbursement

11 / 10 / 2005

Amount of Each Disbursement this Period

318.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2134

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

115.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2137

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

115.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2115

Date of Disbursement

11 / 18 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2104

Date of Disbursement

11 / 10 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2135

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

115.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2133

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

115.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2112

Date of Disbursement

/ /

Amount of Each Disbursement this Period

133.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2120

Date of Disbursement

/ /

Amount of Each Disbursement this Period

92.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2116

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2118

Date of Disbursement

/ /

Amount of Each Disbursement this Period

399.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
CREDIT ON AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2114

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-614.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CREDIT ON AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2109

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2138

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2117

Date of Disbursement

11 / 18 / 2005

Amount of Each Disbursement this Period

614.90

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2132

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

155.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City	State	Zip Code
Chillicothe	MO	64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: 60802.E2122

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	0	5

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City	State	Zip Code
Chillicothe	MO	64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: 60802.E2108

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	6		2	0	0	5

Amount of Each Disbursement this Period

159.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City	State	Zip Code
Chillicothe	MO	64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: 60802.E2100

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	8		2	0	0	5

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

MEMO: AGENT FEE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City	State	Zip Code
Chillicothe	MO	64601-

Purpose of Disbursement
CREDIT ON AIRFARE

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	--

Transaction ID: 60802.E2096

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	5

Amount of Each Disbursement this Period

-770.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

MEMO: CREDIT ON AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City	State	Zip Code
Chillicothe	MO	64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	--

Transaction ID: 60802.E2095

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	5

Amount of Each Disbursement this Period

363.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City	State	Zip Code
Chillicothe	MO	64601-

Purpose of Disbursement
CREDIT ON AIRFAIR

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	--

Transaction ID: 60802.E2099

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	8	/	2	0	0	5

Amount of Each Disbursement this Period

-385.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

MEMO: CREDIT ON AIRFAIR

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
CREDIT ON AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2101

Date of Disbursement

11 / 08 / 2005

Amount of Each Disbursement this Period

-159.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CREDIT ON AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2139

Date of Disbursement

11 / 28 / 2005

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
CREDIT ON AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2106

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

-318.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CREDIT ON AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. U.S. House of Representatives

Mailing Address U.S. Capitol

City
Washington

State
DC

Zip Code
20515-

Purpose of Disbursement
GIFT FOR CONSTITUENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2125

Date of Disbursement

/ /

Amount of Each Disbursement this Period

17.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GIFT FOR CONSTITUENT

Full Name (Last, First, Middle Initial)

B. USPS-Liberty

Mailing Address 1000 Progress Dr

City
Liberty

State
MO

Zip Code
64068-

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2105

Date of Disbursement

/ /

Amount of Each Disbursement this Period

37.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

C. USPS-NKC

Mailing Address 820 Armour Rd

City
Kansas City

State
MO

Zip Code
64116-

Purpose of Disbursement
STAMPS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2119

Date of Disbursement

/ /

Amount of Each Disbursement this Period

74.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: STAMPS

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Village Flowers by Rob

Mailing Address 3841 Frederick Ave

City Saint Joseph State MO Zip Code 64506-

Purpose of Disbursement
SYMPATHY FLOWERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2098

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SYMPATHY FLOWERS

Full Name (Last, First, Middle Initial)

B. Watkins True Value

Mailing Address 1416 S. Main

City Maryville State MO Zip Code 64468-

Purpose of Disbursement
CHRISTMAS PARTY SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2147

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CHRISTMAS PARTY SUPPLIES

Full Name (Last, First, Middle Initial)

C. Y Liquor

Mailing Address 346 S. State Route 291

City Liberty State MO Zip Code 64068-

Purpose of Disbursement
FOOD/BEVERAGE FOR EVENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2143

Date of Disbursement

/ /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FOOD/BEVERAGE FOR EVENT

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address 1210 Mexico City Ave

City State Zip Code
 Kansas City MO 64153-

Purpose of Disbursement
 SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2169

Date of Disbursement

/ /

Amount of Each Disbursement this Period

23.06

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SHIPPING CHARGES

Full Name (Last, First, Middle Initial)

B. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City State Zip Code
 San Dimas CA 91773-

Purpose of Disbursement
 PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2179

Date of Disbursement

/ /

Amount of Each Disbursement this Period

82.36

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

PROCESSING FEES

Full Name (Last, First, Middle Initial)

C. UMB Visa

Mailing Address 1010 Grand Blvd.

City State Zip Code
 Kansas City MO 64106-

Purpose of Disbursement
 CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2044

Date of Disbursement

/ /

Amount of Each Disbursement this Period

310.04

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

415.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Bullfeathers of Captial Hill

Mailing Address 410 1st St SE 1

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement
LUNCH MEETING W/ HOUSE MEMBER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2046

Date of Disbursement

10 / 26 / 2005

Amount of Each Disbursement this Period

25.51

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: LUNCH MEETING W/ HO-
USE MEMBER

Full Name (Last, First, Middle Initial)

B. Capitol Hill Club

Mailing Address 300 1st Street, S.E.

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement
GIFT FOR CONSITUENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2045

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

173.65

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GIFT FOR CONSITUENT

Full Name (Last, First, Middle Initial)

C. U.S. House of Representatives

Mailing Address U.S. Capitol

City
Washington

State
DC

Zip Code
20515-

Purpose of Disbursement
CONSTITUENT GIFT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2048

Date of Disbursement

11 / 04 / 2005

Amount of Each Disbursement this Period

67.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CONSTITUENT GIFT

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. U.S. House of Representatives

Mailing Address U.S. Capitol

City Washington State DC Zip Code 20515-

Purpose of Disbursement
CONSTITUENT GIFT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2047

Date of Disbursement

/ /

Amount of Each Disbursement this Period

43.44

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CONSTITUENT GIFT

Full Name (Last, First, Middle Initial)

B. Express Flight, Inc.

Mailing Address P.O. Box 3262, Station A

City Saint Joseph State MO Zip Code 64503-

Purpose of Disbursement
TRAVEL - AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2166

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2783.74

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TRAVEL - AIRFARE

Full Name (Last, First, Middle Initial)

C. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City San Dimas State CA Zip Code 91773-

Purpose of Disbursement
PAYROLL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2185

Date of Disbursement

/ /

Amount of Each Disbursement this Period

562.56

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL EXPENSE

SUBTOTAL of Disbursements This Page (optional)

3346.30

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Shawna M. Pauley

Mailing Address 1126 Elm Street

City
ChillicotheState
MOZip Code
64601-Purpose of Disbursement
SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2187

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. AT&T Telephone Company

Mailing Address P.O. Box 940012

City
DallasState
TXZip Code
75394-Purpose of Disbursement
OFFICE PHONE EXPENSE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2157

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	5

Amount of Each Disbursement this Period

1412.72

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

OFFICE PHONE EXPENSE

Full Name (Last, First, Middle Initial)

C. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City
San DimasState
CAZip Code
91773-Purpose of Disbursement
PROCESSING FEE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2183

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

31.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PROCESSING FEE

SUBTOTAL of Disbursements This Page (optional)

3443.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Sarah N. Bowles

Mailing Address 10231 N. Cherry Dr.

City Kansas City State MO Zip Code 64155-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2191

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. Lathrop & Gage, LLC.

Mailing Address 2345 Grand Blvd

City Kansas City State MO Zip Code 64108-2684

Purpose of Disbursement
POSTAGE LONG-DISTANCE COPIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2162

Date of Disbursement

/ /

Amount of Each Disbursement this Period

196.43

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POSTAGE LONG-DISTANCE COP-
IES

Full Name (Last, First, Middle Initial)

C. The Mail Haus

Mailing Address 1709 Surburban Dr.

City De Pere State WI Zip Code 54115-

Purpose of Disbursement
MAILING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2163

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1554.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MAILING

SUBTOTAL of Disbursements This Page (optional)

4250.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Nova Information Systems

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920-

Purpose of Disbursement
CREDIT CARD PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2176

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

30.11

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD PROCESSING FEE

Full Name (Last, First, Middle Initial)

B. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City San Dimas State CA Zip Code 91773-

Purpose of Disbursement
PAYROLL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2186

Date of Disbursement

12 / 29 / 2005

Amount of Each Disbursement this Period

990.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL EXPENSE

Full Name (Last, First, Middle Initial)

C. Shawn Graybill

Mailing Address 4443 NE 83rd Terr

City Kansas City State MO Zip Code 64119-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2194

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional)

3520.47

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Shawna M. Pauley

Mailing Address 1126 Elm Street

City
ChillicotheState
MOZip Code
64601-Purpose of Disbursement
SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2198

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. Shawna M. Pauley

Mailing Address 1126 Elm Street

City
ChillicotheState
MOZip Code
64601-Purpose of Disbursement
SALARY

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2188

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	5

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

C. National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City
WashingtonState
DCZip Code
20003-Purpose of Disbursement
FAX SENT ON BEHALF OF CANDIDAT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.C6774IK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	2	/	2	0	0	5

Amount of Each Disbursement this Period

98.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53IN KIND: FAX SENT ON BEHA-
LF OF CANDIDAT**SUBTOTAL** of Disbursements This Page (optional)

4098.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. UMB Visa

Mailing Address 1010 Grand Blvd.

City Kansas City State MO Zip Code 64106-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2012

Date of Disbursement

/ /

Amount of Each Disbursement this Period

870.34

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Federal Express Shipping

Mailing Address PO Box 94515

City Palatine State IL Zip Code 60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2015

Date of Disbursement

/ /

Amount of Each Disbursement this Period

39.66

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

Full Name (Last, First, Middle Initial)

C. Federal Express Shipping

Mailing Address PO Box 94515

City Palatine State IL Zip Code 60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2024

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19.83

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

SUBTOTAL of Disbursements This Page (optional)

870.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Federal Express Shipping

Mailing Address PO Box 94515

City
Palatine

State
IL

Zip Code
60094-

Purpose of Disbursement
SHIPPING CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2031

Date of Disbursement

/ /

Amount of Each Disbursement this Period

19.83

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: SHIPPING CHARGES

Full Name (Last, First, Middle Initial)

B. Hy-Vee Foods

Mailing Address 1332 H 152 Highway

City
Liberty

State
MO

Zip Code
64068-

Purpose of Disbursement
FOOD FOR EVENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2017

Date of Disbursement

/ /

Amount of Each Disbursement this Period

44.01

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: FOOD FOR EVENT

Full Name (Last, First, Middle Initial)

C. Hy-Vee Foods

Mailing Address 1332 H 152 Highway

City
Liberty

State
MO

Zip Code
64068-

Purpose of Disbursement
CLEANING SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2014

Date of Disbursement

/ /

Amount of Each Disbursement this Period

31.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: CLEANING SUPPLIES

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Office Depot

Mailing Address 8501 North Evanston Avenue

City Kansas City State MO Zip Code 64157-

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2018

Date of Disbursement

09 / 21 / 2005

Amount of Each Disbursement this Period

25.77

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2027

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

115.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2026

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

115.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2028

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2029

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

C. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2020

Date of Disbursement

09 / 21 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2019

Date of Disbursement

09 / 21 / 2005

Amount of Each Disbursement this Period

93.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AIRFARE

Full Name (Last, First, Middle Initial)

B. Travel Tyme

Mailing Address 1904 Clay Street

City Chillicothe State MO Zip Code 64601-

Purpose of Disbursement
AGENT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2030

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: AGENT FEE

Full Name (Last, First, Middle Initial)

C. National Republican Congressional Commit

Mailing Address 320 First Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
FAX SENT ON BEHALF OF CANDIADT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.C67771K

Date of Disbursement

12 / 02 / 2005

Amount of Each Disbursement this Period

98.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

IN KIND: FAX SENT ON BEHA-
LF OF CANDIADT

SUBTOTAL of Disbursements This Page (optional)

98.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Michael Britt

Mailing Address 314 S. Carolina Ave, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2196

Date of Disbursement

12 / 29 / 2005

Amount of Each Disbursement this Period

6000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

B. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City San Dimas State CA Zip Code 91773-

Purpose of Disbursement
PARYROLL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2201

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

1037.56

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PARYROLL EXPENSE

Full Name (Last, First, Middle Initial)

C. The Salvation Army

Mailing Address 4300 N.E. Parvin Road

City Kansas City State MO Zip Code 64117-

Purpose of Disbursement
CHARITABLE DONATION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2165

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CHARITABLE DONATION

SUBTOTAL of Disbursements This Page (optional)

8037.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City San Dimas State CA Zip Code 91773-

Purpose of Disbursement
PROCESSING FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2180

Date of Disbursement

/ /

Amount of Each Disbursement this Period

72.46

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PROCESSING FEE

Full Name (Last, First, Middle Initial)

B. Sarah N. Bowles

Mailing Address 10231 N. Cherry Dr.

City Kansas City State MO Zip Code 64155-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2192

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

C. Michael Britt

Mailing Address 314 S. Carolina Ave, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2197

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional)

8572.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City
San Dimas

State
CA

Zip Code
91773-

Purpose of Disbursement
PAYROLL EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2184

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

562.56

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL EXPENSE

Full Name (Last, First, Middle Initial)

B. Shawn Graybill

Mailing Address 4443 NE 83rd Terr

City
Kansas City

State
MO

Zip Code
64119-

Purpose of Disbursement
SALARY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2193

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

C. Automatic Data Processing, Inc.

Mailing Address 400 W. Covina Blvd.

City
San Dimas

State
CA

Zip Code
91773-

Purpose of Disbursement
PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60802.E2178

Date of Disbursement

10 / 13 / 2005

Amount of Each Disbursement this Period

31.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PROCESSING FEES

SUBTOTAL of Disbursements This Page (optional)

3093.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. UMB Visa

Mailing Address 1010 Grand Blvd.

City Kansas City State MO Zip Code 64106-

Purpose of Disbursement
CREDIT CARD: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2087

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1811.30

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

B. Berbiglia Wine & Spirit

Mailing Address 8300 N Church Road

City Kansas City State MO Zip Code 64158-

Purpose of Disbursement
REFRESHNENTS FOR CHRISTMAS PARTY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2091

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1419.64

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: REFRESHNENTS FOR
CHRISTMAS PARTY

Full Name (Last, First, Middle Initial)

C. Capitol Hill Club

Mailing Address 300 1st Street, S.E.

City Washington State DC Zip Code 20003-

Purpose of Disbursement
GIFT FOR CONSTITUENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2090

Date of Disbursement

/ /

Amount of Each Disbursement this Period

179.41

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: GIFT FOR CONSTITUENT

SUBTOTAL of Disbursements This Page (optional)

1811.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Dubliner Restaurant

Mailing Address 520 N Capitol St, NW

City
Washington

State
DC

Zip Code
20001-

Purpose of Disbursement
ENTERTAIN CONSTITUENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2089

Date of Disbursement

/ /

Amount of Each Disbursement this Period

40.24

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: ENTERTAIN CONSTITU-
ENT

Full Name (Last, First, Middle Initial)

B. Dubliner Restaurant

Mailing Address 520 N Capitol St, NW

City
Washington

State
DC

Zip Code
20001-

Purpose of Disbursement
ENTERTAIN CONSTITUENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60802.E2088

Date of Disbursement

/ /

Amount of Each Disbursement this Period

29.25

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

MEMO: ENTERTAIN CONSTITUE-
NT

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

80135.69

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 104 / 105

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Graves for Congress**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Boyles Motors, Inc.Nature of Debt (Purpose):
Vehicle Lease

Mailing Address 204 N. Market Street

City State ZIP Code
Maryville MO 64468-

Outstanding Balance Beginning This Period

500.00

Transaction ID: 3LS60802.E42

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kwrt-am/kwrt-fmNature of Debt (Purpose):
Radio Advertising

Mailing Address 1600 Radio Hill Road

City State ZIP Code
Boonville MO 65233-

Outstanding Balance Beginning This Period

857.65

Transaction ID: 2LS60802.E45

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Willard DowdenNature of Debt (Purpose):
Rent for Nodaway Co. Repu-
bican Com

Mailing Address Route 1, Box 116

City State ZIP Code
Burlington Junction MO 64428-

Outstanding Balance Beginning This Period

200.00

Transaction ID: 4LS60802.E46

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

1) SUBTOTALS This Period This Page (optional).....

1557.65

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 105 / 105

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
Graves for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Missouri Right to Life PAC

Nature of Debt (Purpose):
Membership Labels

Mailing Address P.O. Box 651

City	State	ZIP Code
Jefferson City	MO	65102-

Outstanding Balance Beginning This Period

1087.00

Transaction ID: LS60802.E49

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1087.00

1) SUBTOTALS This Period This Page (optional).....

1087.00

2) TOTALS This Period (last page this line number only).....

2644.65

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)